

IN THE CIRCUIT COURT OF COOK COUNTY, ILLINOIS, FIRST MUNICIPAL DISTRICT

In the name and by the authority of the

☐ People of the State of Illinois ☐ City of Chicago, a Municipal Corporation, Plaintiff, vs.

TW151948

CHICAGO POLICE DEPARTMENT CITATION AND COMPLAINT

Last Name		First Name		Middle Initial	
Address					
<input type="checkbox"/> Oper. License <input type="checkbox"/> CDL					
Day of Week	MO	DAY	YEAR	Time	at
On		20		M	
Did then drive and operate a certain motor vehicle, to wit, a			Make	Year	Color
<input type="checkbox"/> Auto <input type="checkbox"/> Truck <input type="checkbox"/> Bus <input type="checkbox"/> Com. Mr. Veh. <input type="checkbox"/> 16 or more Pass. Veh.			<input type="checkbox"/> Taxi <input type="checkbox"/> Motorcycle <input type="checkbox"/> Placarded Haz. Mr.		
Upon a public highway/street of this State, to wit			Address of Occurrence		Dir.
Bound			No.		Street
State License Plate No.			State		Expires Mo/Yr
<input type="checkbox"/> Prop Dam <input type="checkbox"/> Per Inj <input type="checkbox"/> Fatal <input type="checkbox"/> Defendant Inj Only			SITUATED WITHIN THE CORPORATE LIMITS OF THE CITY OF CHICAGO AFORESAID AND DID THEN AND THERE COMMIT THE FOLLOWING OFFENSE		
RD#			Illinois Vehicle Code 625 ILCS 5/:		
Name of Witness			<input type="checkbox"/> RADAR <input type="checkbox"/> LASER <input type="checkbox"/> LIDAR		
Address			Municipal Code of Chicago (MCC):		
City, State, Zip			<input type="checkbox"/> 3-701 NO VALID STATE REGISTRATION <input type="checkbox"/> 11-601 (b) SPEEDING MPH IN A MPH ZONE		
COMPLETE AND ATTACH THE ADDITIONAL WITNESS INFORMATION-PERSONAL SERVICE CITATION FORM			<input type="checkbox"/> 3-707 OPERATING UNINSURED VEHICLE <input type="checkbox"/> 11-605 (a) SPEEDING IN A SCHOOL ZONE		
Without admitting guilt, I promise to comply with the terms of this citation and release.			<input type="checkbox"/> 6-101 NO VALID DRIVER'S LICENSE <input type="checkbox"/> 11-605.1 SPEEDING IN A CONSTRUCTION ZONE		
Signature			<input type="checkbox"/> 6-303(a) DRIVING WHILE LICENSE SUSPENDED/REVOKED		
OFFENSE NOT LISTED (USE OTHER OFFENSE BOX BELOW)			<input type="checkbox"/> 6-112 FAILURE TO PRODUCE DRIVER'S LICENSE		
CH SEC OFFENSE			<input type="checkbox"/> 11-501 (a) DRIVING UNDER INFLUENCE		
The undersigned certifies that the statements set forth in this instrument are true and correct.			<input type="checkbox"/> 11-502 ILLEGAL TRANSPORTATION ALCOHOL		
Star #			<input type="checkbox"/> 12-603.1 FAILURE TO WEAR SEAT BELT (D) (P)		
Officer's Signature			<input type="checkbox"/> 11-601 (a) FAILURE TO REDUCE SPEED/ACCIDENT		
Unit			Booked At		

DRIVER'S COPY

DO NOT MAIL THIS COPY - SEE DRIVER'S INSTRUCTION SHEET (RETAIN THIS COPY FOR 2 YEARS)

DRIVER'S COPY - See Reverse for Court Location

IN THE CIRCUIT COURT OF COOK COUNTY, ILLINOIS, FIRST MUNICIPAL DISTRICT

In the name and by the authority of the

☐ People of the State of Illinois ☐ City of Chicago, a Municipal Corporation, Plaintiff, vs.

TW151950

☐ VIDEO RECORDED INCIDENT COMPLAINT NO.

TW

CHICAGO POLICE DEPARTMENT CITATION AND COMPLAINT

Last Name		First Name		Middle Initial	
Address					
<input type="checkbox"/> Oper. License <input type="checkbox"/> CDL					
Day of Week	MO	DAY	YEAR	Time	at
On		20		M	
Did then drive and operate a certain motor vehicle, to wit, a			Make	Year	Color
<input type="checkbox"/> Auto <input type="checkbox"/> Truck <input type="checkbox"/> Bus <input type="checkbox"/> Com. Mr. Veh. <input type="checkbox"/> 16 or more Pass. Veh.			<input type="checkbox"/> Taxi <input type="checkbox"/> Motorcycle <input type="checkbox"/> Placarded Haz. Mr.		
Upon a public highway/street of this State, to wit			Address of Occurrence		Dir.
Bound			No.		Street
State License Plate No.			State		Expires Mo/Yr
<input type="checkbox"/> Prop Dam <input type="checkbox"/> Per Inj <input type="checkbox"/> Fatal <input type="checkbox"/> Defendant Inj Only			SITUATED WITHIN THE CORPORATE LIMITS OF THE CITY OF CHICAGO AFORESAID AND DID THEN AND THERE COMMIT THE FOLLOWING OFFENSE		
RD#			Illinois Vehicle Code 625 ILCS 5/:		
Name of Witness			<input type="checkbox"/> RADAR <input type="checkbox"/> LASER <input type="checkbox"/> LIDAR		
Address			Municipal Code of Chicago (MCC):		
City, State, Zip			<input type="checkbox"/> 3-701 NO VALID STATE REGISTRATION <input type="checkbox"/> 11-601 (b) SPEEDING MPH IN A MPH ZONE		
COMPLETE AND ATTACH THE ADDITIONAL WITNESS INFORMATION-PERSONAL SERVICE CITATION FORM			<input type="checkbox"/> 3-707 OPERATING UNINSURED VEHICLE <input type="checkbox"/> 11-605 (a) SPEEDING IN A SCHOOL ZONE		
Without admitting guilt, I promise to comply with the terms of this citation and release.			<input type="checkbox"/> 6-101 NO VALID DRIVER'S LICENSE <input type="checkbox"/> 11-605.1 SPEEDING IN A CONSTRUCTION ZONE		
Signature			<input type="checkbox"/> 6-303(a) DRIVING WHILE LICENSE SUSPENDED/REVOKED		
OFFENSE NOT LISTED (USE OTHER OFFENSE BOX BELOW)			<input type="checkbox"/> 6-112 FAILURE TO PRODUCE DRIVER'S LICENSE		
CH SEC OFFENSE			<input type="checkbox"/> 11-501 (a) DRIVING UNDER INFLUENCE		
The undersigned certifies that the statements set forth in this instrument are true and correct.			<input type="checkbox"/> 11-502 ILLEGAL TRANSPORTATION ALCOHOL		
Star #			<input type="checkbox"/> 12-603.1 FAILURE TO WEAR SEAT BELT (D) (P)		
Officer's Signature			<input type="checkbox"/> 11-601 (a) FAILURE TO REDUCE SPEED/ACCIDENT		
Unit			Booked At		

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IN THE CIRCUIT COURT OF COOK COUNTY, ILLINOIS, FIRST MUNICIPAL DISTRICT

In the name and by the authority of the

☐ People of the State of Illinois ☐ City of Chicago, a Municipal Corporation, Plaintiff, vs.

TW151949

☐ VIDEO RECORDED INCIDENT COMPLAINT NO.

TW

CHICAGO POLICE DEPARTMENT CITATION AND COMPLAINT

Last Name		First Name		Middle Initial	
Address					
<input type="checkbox"/> Oper. License <input type="checkbox"/> CDL					
Day of Week	MO	DAY	YEAR	Time	at
On		20		M	
Did then drive and operate a certain motor vehicle, to wit, a			Make	Year	Color
<input type="checkbox"/> Auto <input type="checkbox"/> Truck <input type="checkbox"/> Bus <input type="checkbox"/> Com. Mr. Veh. <input type="checkbox"/> 16 or more Pass. Veh.			<input type="checkbox"/> Taxi <input type="checkbox"/> Motorcycle <input type="checkbox"/> Placarded Haz. Mr.		
Upon a public highway/street of this State, to wit			Address of Occurrence		Dir.
Bound			No.		Street
State License Plate No.			State		Expires Mo/Yr
<input type="checkbox"/> Prop Dam <input type="checkbox"/> Per Inj <input type="checkbox"/> Fatal			SITUATED WITHIN THE CORPORATE LIMITS OF THE CITY OF CHICAGO AFORESAID AND DID THEN AND THERE COMMIT THE FOLLOWING OFFENSE		
RD#			Illinois Vehicle Code 625 ILCS 5/:		
Name of Witness			<input type="checkbox"/> RADAR <input type="checkbox"/> LASER <input type="checkbox"/> LIDAR		
Address			Municipal Code of Chicago (MCC):		
City, State, Zip			<input type="checkbox"/> 3-701 NO VALID STATE REGISTRATION <input type="checkbox"/> 11-601 (b) SPEEDING MPH IN A MPH ZONE		
COMPLETE AND ATTACH THE ADDITIONAL WITNESS INFORMATION-PERSONAL SERVICE CITATION FORM			<input type="checkbox"/> 3-707 OPERATING UNINSURED VEHICLE <input type="checkbox"/> 11-605 (a) SPEEDING IN A SCHOOL ZONE		
Without admitting guilt, I promise to comply with the terms of this citation and release.			<input type="checkbox"/> 6-101 NO VALID DRIVER'S LICENSE <input type="checkbox"/> 11-605.1 SPEEDING IN A CONSTRUCTION ZONE		
Signature			<input type="checkbox"/> 6-303(a) DRIVING WHILE LICENSE SUSPENDED/REVOKED		
OFFENSE NOT LISTED (USE OTHER OFFENSE BOX BELOW)			<input type="checkbox"/> 6-112 FAILURE TO PRODUCE DRIVER'S LICENSE		
CH SEC OFFENSE			<input type="checkbox"/> 11-501 (a) DRIVING UNDER INFLUENCE		
The undersigned certifies that the statements set forth in this instrument are true and correct.			<input type="checkbox"/> 11-502 ILLEGAL TRANSPORTATION ALCOHOL		
Star #			<input type="checkbox"/> 12-603.1 FAILURE TO WEAR SEAT BELT (D) (P)		
Officer's Signature			<input type="checkbox"/> 11-601 (a) FAILURE TO REDUCE SPEED/ACCIDENT		
Unit			Booked At		

CPD 0004985

DRIVER'S COPY - See Reverse for Court Location

IN THE CIRCUIT COURT OF COOK COUNTY, ILLINOIS, FIRST MUNICIPAL DISTRICT

In the name and by the authority of the

☐ People of the State of Illinois ☐ City of Chicago, a Municipal Corporation, Plaintiff, vs.



☐ VIDEO RECORDED INCIDENT COMPLAINT NO.

TW

CHICAGO POLICE DEPARTMENT CITATION AND COMPLAINT

Name		Address		Weight	
<input type="checkbox"/> Oper. Lic. <input type="checkbox"/> CDL					
Day of Week	MO DAY YEAR	Time	Did then drive and operate a certain motor vehicle, to wit, a	Make	Year
On	20	at	M		
Upon a public highway/street of this State, to wit		Address of Occurrence	Dir.	Street	State
Bound		No.			License Plate No.
<input type="checkbox"/> Prop Dam <input type="checkbox"/> Per Inj <input type="checkbox"/> Fatal <input type="checkbox"/> Defendant Inj Only		SITUATED WITHIN THE CORPORATE LIMITS OF THE CITY OF CHICAGO AFORESAID AND DID THEN AND THERE COMMIT THE FOLLOWING OFFENSE Illinois Vehicle Code 625 ILCS 5/			
RD#		<input type="checkbox"/> 3-701 NO VALID STATE REGISTRATION <input type="checkbox"/> 11-601 (b) SPEEDING MPH IN A MPH ZONE <input type="checkbox"/> 3-707 OPERATING UNINSURED VEHICLE <input type="checkbox"/> 11-605 (a) SPEEDING IN A SCHOOL ZONE <input type="checkbox"/> 6-101 NO VALID DRIVER'S LICENSE <input type="checkbox"/> 11-605.1 SPEEDING IN A CONSTRUCTION ZONE <input type="checkbox"/> 6-303(a) DRIVING WHILE LICENSE SUSPENDED/REVOKED <input type="checkbox"/> 6-112 FAILURE TO PRODUCE DRIVER'S LICENSE <input type="checkbox"/> 11-501 (a) DRIVING UNDER INFLUENCE <input type="checkbox"/> 11-502 ILLEGAL TRANSPORTATION ALCOHOL <input type="checkbox"/> 12-603.1 FAILURE TO WEAR SEAT BELT () D () P <input type="checkbox"/> 11-601 (a) FAILURE TO REDUCE SPEED/ACCIDENT			
Name of Witness		STANDARDIZED FIELD SOBRIETY TESTS RECORDED OFFENSE NOT LISTED (USE OTHER OFFENSE BOX BELOW)			
Address		<input type="checkbox"/> 625 ILCS <input type="checkbox"/> MCC CH SEC OFFENSE			
City, State, Zip		The undersigned certifies that the statements set forth in this instrument are true and correct.			
Without admitting guilt, I promise to comply with the terms of this citation and release.		Signature _____ Star # _____ Unit _____ Booked At _____ Officer's Signature _____			

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IN THE CIRCUIT COURT OF COOK COUNTY, ILLINOIS, FIRST MUNICIPAL DISTRICT

In the name and by the authority of the

☐ People of the State of Illinois ☐ City of Chicago, a Municipal Corporation, Plaintiff, vs.



☐ VIDEO RECORDED INCIDENT COMPLAINT NO.

TW-151-952

CHICAGO POLICE DEPARTMENT CITATION AND COMPLAINT

Last Name		Address		Weight	
<input type="checkbox"/> Oper. License <input type="checkbox"/> CDL					
Day of Week	MO DAY YEAR	Time	Did then drive and operate a certain motor vehicle, to wit, a	Make	Year
On	20	at	M		
Upon a public highway/street of this State, to wit		Address of Occurrence	Dir.	Street	State
Bound		No.			License Plate No.
<input type="checkbox"/> Prop Dam <input type="checkbox"/> Per Inj <input type="checkbox"/> Fatal <input type="checkbox"/> Defendant Inj Only		SITUATED WITHIN THE CORPORATE LIMITS OF THE CITY OF CHICAGO AFORESAID AND DID THEN AND THERE COMMIT THE FOLLOWING OFFENSE Illinois Vehicle Code 625 ILCS 5/			
RD#		<input type="checkbox"/> 3-701 NO VALID STATE REGISTRATION <input type="checkbox"/> 11-601 (b) SPEEDING MPH IN A MPH ZONE <input type="checkbox"/> 3-707 OPERATING UNINSURED VEHICLE <input type="checkbox"/> 11-605 (a) SPEEDING IN A SCHOOL ZONE <input type="checkbox"/> 6-101 NO VALID DRIVER'S LICENSE <input type="checkbox"/> 11-605.1 SPEEDING IN A CONSTRUCTION ZONE <input type="checkbox"/> 6-303(a) DRIVING WHILE LICENSE SUSPENDED/REVOKED <input type="checkbox"/> 6-112 FAILURE TO PRODUCE DRIVER'S LICENSE <input type="checkbox"/> 11-501 (a) DRIVING UNDER INFLUENCE <input type="checkbox"/> 11-502 ILLEGAL TRANSPORTATION ALCOHOL <input type="checkbox"/> 12-603.1 FAILURE TO WEAR SEAT BELT () D () P <input type="checkbox"/> 11-601 (a) FAILURE TO REDUCE SPEED/ACCIDENT			
Name of Witness		STANDARDIZED FIELD SOBRIETY TESTS RECORDED OFFENSE NOT LISTED (USE OTHER OFFENSE BOX BELOW)			
Address		<input type="checkbox"/> 625 ILCS <input type="checkbox"/> MCC CH SEC OFFENSE			
City, State, Zip		The undersigned certifies that the statements set forth in this instrument are true and correct.			
Without admitting guilt, I promise to comply with the terms of this citation and release.		Signature _____ Star # _____ Unit _____ Booked At _____ Officer's Signature _____			

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LOG # 1049215
Attachment # 23